

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 or Fax (703) 746-4000

APR 05 2004

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

26551 7590 03/17/2004

HOLLIS-EDEN PHARMACEUTICALS, INC.  
 4435 E. ST. GATE MALL  
 SUITE 400  
 SAN DIEGO, CA 92121

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Brenda Mannon-Freeman (Depositor's name)  
 Brenda Mannon Freeman (Signature)  
 April 02, 2004 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/554,951	11/27/2000	Charles E. Weeks	HOLISED.033A	6317

TITLE OF INVENTION: USE OF DELTA5-ANDROSTENE-3BETA-OL7,17-DIONE IN THE TREATMENT OF ARTHRITIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	06/17/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
HUI, SAN MING R	1617	514-178000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.353).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Daryl D. Muenchau  
 2.  
 3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Humanetics Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Chanhassen, MN USA

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

- ☐ Issue Fee
- ☐ Publication Fee
- ☒ Advance Order - # of Copies 6

## 4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501536 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Daryl D. Muenchau April 02, 2004

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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1. 04/06/2004 JADD02 00000106 501536 09554951  
 01 FC:2501 665.00 DA  
 02 FC:8001 18.00 DA

TRANSMIT THIS FORM WITH FEE(S)



Patent  
Serial No. 09/554,951

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Charles E. Weeks  
Application No. : 09/554,951  
Filed : November 27, 2000  
For : THE USE OF  $\Delta$ 5-ANDROSTENE-3 $\beta$ -OL-7,17-  
DIONE IN THE TREATMENT OF ARTHRITIS  
Examiner : Hui, San-Ming R.  
T.C./AU : 1617  
  
Confirmation No. : 6317  
Docket No. : HOLISED.033A  
Customer No. : 26,551

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**TRANSMITTAL LETTER**

Mail Stop: ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Please charge the \$665.00 issue fee and \$18.00 fee for 6 copies of the issued patent to deposit account No. 501536. Please charge any other fees that may be due or credit any overpayment to deposit account No. 501536. The following papers accompany this letter;

- (X) Issue Fee Transmittal (in duplicate).
- (X) Certificate of first class mailing under 37 C.F.R. § 1.8.
- (X) Postage prepaid return postcard.

Please send correspondence to customer No. 26,551.

Respectfully submitted,

Date: April 1, 2004

Daryl D. Muenchau

Daryl D. Muenchau  
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